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PREPARE IN DUPLICATE							DD	5/0e-	033	
1. TITLE OF REPORT (if a fill-in report include Form No.) 2. TYPE X STATISTICAL										
Check List of Current Orders, Notices, and							OF REPORT	X NARR	ATIVE	
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3. FUNCTIONAL AREA 4. NO. OF COPIES PREPARED		PERSONNEL		TRAINING		1 1		GENERAL		
		LOGISTICS		SECURITY		2	OTHER (specify) COMMUNICATIONS			
			Y (weekly, mo	, monthly, quarterly, etc.)		, – .	DISTRIBUTION (No. of components not			
						f.c	sumber of copies)			
7. FORMAT (memorandum, form computer print-out, etc) Notice						60	0 plus 1-Vital Docs.			
							E AUTHOR	ITY REQUIR	ING REPORT	
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			12.		ACTORS					
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5-2 TOTAL COSTS PER YEAR							\$289.30			
13. COMPLETE DET	AILED JUSTIF	ICATION FOR T	HIS REPORT (in addition	to directive	or aut			em 9). IF KNOWN,	
INCLUDE DATE	REPORT WAS	FIRST STARTED	AND COMPONE	NT WHO ESTA	BLISHED REQUIR	EMENT.				
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16. DATE OF INVEN		. NAME AND TE	TLE OF PERSON	FURNISHIN	G INFORMATION				18. EXTENSION	
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